MEDICAL CONTROL GUIDELINE: PERFUSION STATUS

PRINCIPLES:

- 1. Perfusion status is determined by a combination of parameters that includes heart rate, blood pressure, tissue color and mentation. No one parameter alone can be used to determine perfusion status.
- 2. Adequate perfusion is defined as adequate circulation of blood through organs and tissues, manifested by normal pulse, tissue color, level of consciousness and blood pressure.
- 3. Poor perfusion is defined as inadequate circulation of blood through organs and tissues manifested by vital sign abnormalities and/or signs and symptoms of organ dysfunction.
- 4. Base hospital contact should be initiated on patients who are hypotensive and/or those who have poor perfusion.

GUIDELINES:

- 1. EMS providers should evaluate for the following signs and use clinical judgement to determine poor perfusion status, which may include but not limited to:
 - a. Adult systolic blood pressure (SBP) less than 90mmHg, pediatric SBP less than 70mmHa
 - b. Bradycardia, tachycardia and/or poor pulse quality (weak/thready)
 - c. Altered mental status (including anxiety, restlessness, lethargy, combative behavior)
 - d. Delayed capillary refill time (greater than 2 seconds) and/or changes in tissue color including pallor, cyanosis or mottling

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